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CONFIRMATION NO. 2520

SERIAL NUMB 10/631,967		FILING DATE 08/01/2003 RULE		CLASS 514	GROU	JP AR1 1617	UNIT	D	ATTORNEY OCKET NO ULDE-0002	
APPLICANTS										
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** CONTINUING DATA **********************************										
** FOREIGN APPLICATIONS ************************************										
IF REQUIRED, F ** 04/21/2004	ORE	IGN FILING LICENSE	GRANTE	ED						
Foreign Priority claime		☐ yes ☒ no _		STATE OR	SHE	ETS	тот	AL.	INDEPENDENT	
35 USC 119 (a-d) cond met Verified and Acknowledged		yes no Met aft	er tials	COUNTRY GERMANY	DRA\	WING	CLAI	MS	CLAIMS 3	
ADDRESS 23599 MILLEN, WHITE 2200 CLARENDO SUITE 1400 ARLINGTON , V 22201	ON B	ANO & BRANIGAN, P. LVD.	C.							
TITLE Progesterone red replacement ther		modulators with increa	ased anti	gonadotropic a	activity t	for fema	ale birth	contro	l and hormone	
					☐ All Fees					
							1.16 Fees (Filing)			
FILING FEE	FILING FEE FEES: Authority has been given in Paper 1.17 Fees (Processing Ext. of							essing Ext. of		

RECEIVED 1968	No to charge/credit DEPOSIT ACCOUN No for following:	time) 1.18 Fees (Issue) Other Credit
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